Entered - 02/09/01 - sb CL01L0095 - DIANNE C. MITCHELL **01-R** -1053

CLAIM OF: ETHEL LEE BALL 1718 Gibon Road Atlanta, Georgia 30315

For damages alleged to have been sustained as a result of a vehicular accident on January 10, 2001 at Bass and Central Streets.

THIS ADVERSED REPORT IS APPROVED

ROSALIND RUBENS NEWELL
DEPUTY CITY ATTORNEY

DEPARTMENT OF LAW - CLAIM INVESTIGATION SUMMARY

Claim No. <u>01L0095</u>	Date: <u>June 20, 2001</u>
Claimant /VictimETHEL LEE BALL	
BY: (Atty)(Ins. Co.)	
BY: (Atty)(Ins. Co.) Address: 1718 Gibon Road, Atlanta, George	ria 30315
Subrogation: Claim for Property damage \$ 2,4 Date of Notice: 02/02/01 Method: Writte	07.36 Rodily Injury \$
Date of Notice: 02/02/01 Method: Writte	n proper X Improper
Conforms to Notice: O.C.G.A. §36-33-5 X	Ante Litem (6 Mo.) X
Conforms to Notice: O.C.G.A. §36-33-5 X Date of Occurrence 01/10/01 Place:	Bass and Central Streets
Department Division	1:
Department Division Employee involved	Disciplinary Action:
NATURE OF CLAIM: The claimant alleges that her vehicle	cle was damaged when a vehicle owned by United Water
Services Atlanta ran a stop sign. The claim was forwarde	ed to United Water Services Atlanta for handling and its
insurance carrier, The Travelers, has settled this claim w	ith the claimant.
INVESTIGATION:	
Statements: City employee Claimant	Others Oral
Pictures Diagrams Reports: Police _	X Dept Report Other
Traffic citations issued: City Driver	Claimant Driver
Citation disposition: City Driver	Claimant Driver
BASIS OF RECOMMENDATION:	
DASIS OF RECOMMENDATION:	
Function: Governmental More than Six Months City not involved X Offer rejected	Ministerial
Improper Notice More than Six Months	Other Damages reasonable
City not involved X Offer rejected	Compromise settlement
Repair/replacement by Ins. Co.	Renair/replacement by City Forces
Claimant Negligent City Negligent	Joint Claim Abandoned
	Respectfully submitted,
	\mathcal{N} , $\mathcal{O}_{\mathcal{A}}$
	/X1. ///.////
•	/ / hour Mittell
	ANVESTIGATOR - DIANNE C. MITCHELL
RECOMMENDATION:	
\mathcal{L}	
Pay \$ Adverse X Acc	count charged: 1A012J012H01
Claims Manager: ///	Concur/date
Committee Action:	Council Action

FORM 23-61

MACON DAMAGES TO

	RE: CLAIM FOR DAMAGES
MUNICIPAL CLERK	
City Hall	Today's Date: 0/- 11-01
55 Trinity Avenue, S.W.	
Atlanta, Georgia 30335	
FFB - 2 2001	02-02-01A11:51 ROVO
Dear Municipal Clerk:	ENTERED - 2-9-01 - SB
· · · · · · · · · · · · · · · · · · ·	
This is to notify the City of Atlanta that I have suffered dam	propert 56
This is to hottly the City of Atlanta that I have sufficient dair	property
and/or \$ pending bodily injury for which I	contend the City is liable.
1. Date of incident: O/ /O O/ 2.	Time of Incident: /// 50 3. Police called:
(month/day/ year)	Yes No
\mathcal{O}_{α}	(C) Canifoni
4. Location of incident (including street address): Base	3 & CENTINE
_	
5. Name of your insurance company: 259uir	e Policy No. Bug 519551WE
6. State what and how incident occurred:	aniver in the
11 1 1 1 1 1 1 1 1 1 1 1	
Untied WATER CO	KAN the Stop Sign At
the intersection of	Bass St and Central
	,
7. ALL ESTIMATES AND DAMAGES ARE SUBJECT	CT TO INSPECTION. THE MAKING OF FALSE CLAIMS WILI
RESULT IN YOUR CLAIM BEING DENIED AND	MAY RESULT IN CRIMINAL PROSECUTION!
8. The registered owner must make the claim for vehicle	damages complete the following and attach tive (2) estimates of sensing an
	damages, complete the lonowing and attach two (2) estimates of repair and
proof of ownership of your vehicle (copy of the current	
proof of ownership of your vehicle (copy of the current	tag receipt or title).
Γ 1	tag receipt or title).
Your vehicle: (Make) (Year)	tag receipt or title). 55738-QF ETheL Lee Bal
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Your vehicle: Ford 86 (Make) (Year) City vehicle: Chevy 1500 R	tag receipt or title). 55738-QF ETHEL LEE BAL (Tag Number) (Driver's Name) Charl Charlin Water
Your vehicle: Ford 86 (Make) (Year) City vehicle: Chevy 1500 R (Make) (City Driver)	(Tag Number) (Tag Number) (Driver's Name) (Department/Bureau)
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